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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 862.C1922

First Named Inventor or Application Identifier

NOBORU HAMADA

Express Mail Label No.		
"	Assistant Commissioner for Batents	

APPLICATION ELEME See MPEP chapter 600 concerning utility paten		Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
1. Fee Transmittal Form (Submit an original, and a duplicate for	r fee processing)	6. Microfiche Computer Program (Appendix)	
2. X Specification Total Pa		7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	
3. X Drawing(s) (35 USC 113) Total Sh	neets 17	a. Computer Readable Copy	
4. X Oath or Declaration Total Pa	ages 1	b. Paper Copy (identical to computer copy)	
		c. Statement verifying identity of above copies	
a. X Newly executed (original or o	,	ACCOMPANYING APPLICATION PARTS	
b. Unexecuted for information p	·	8. X Assignment Papers (cover sheet & document(s))	
c. Copy from a prior application (for continuation/divisional with [Note Box 5 below]		9. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney	
i. <u>DELETION OF IN</u> Signed Statement a inventor(s) named ir		10. English Translation Document (if applicable)	
37 CFR 1.63(d)(2) a 5. Incorporation By Reference (useable if Bo	x 4c is checked)	11. Information Disclosure Copies of IDS Citations	
the oath or declaration is supplied under E being part of the disclosure of the accomp	disclosure of the prior application, from which a copy of r declaration is supplied under Box 4c, is considered as of the disclosure of the accompanying application and is		
nereby incorporated by reference therein.	incorporated by reference therein. 13. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)		
the state of the s		14. Small Entity Statement filed in prior application Status still proper and desired	
\frac{1}{2}	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)		
		16. Other:	
17. If a CONTINUING APPLICATION, check ap	propriate box and supply	L the requisite information:	
Continuation Divisional		-in-part (CIP) of prior application No/	
	18. CORRESPO	NDENCE ADDRESS	
X Customer Number or Bar Code Label 05514 or Correspondence address below			
NAME			
Address			
City	State	Zip Code	
Country	Telephone	Fax	

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	22-20	2	X \$ 18.00 =	\$ 36.00
INDEPENDENT CLAIMS (37 CFR 1.16(b))		3-3 =	0 × \$	X \$ 78.00 =	0
	MULTIPLE DEPENDENT	Γ CLAIMS (if applicable) (37 (CFR 1.16(d))	\$260.00 =	0
				BASIC FEE (37 CFR 1.16(a))	\$690.00
			Total of	above Calculations =	\$726.00
	Reduction by	50% for filing by small en	tity (Note 37 CFR 1.9, 1	.27, 1.28).	
				TOTAL =	\$726.00
21. \[\sum_	A check in the amo A check in the amo C A check in the amo	er claimed. unt of \$ <u>726.00</u> to cover to unt of \$ <u>40.00</u> to cover the	the filing fee is enclosed e recordal fee is enclose	ed.	
No a.	o. 06-1205: X Fees requ	ired under 37 CFR 1.16.			
b.	X Fees required under 37 CFR 1.17.				
	1 1 -	ired under 37 CFR 1.18.			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED		
NAME	Leonard P. Diana (Reg. No. 29,296)	
SIGNATURE	2-2-5	
DATE	June 5, 2000	

/PAP NY_MAIN 87289 v 1